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CASE STUDY OF THE EASTERN STATE HOSPITAL AS EVIDENCE OF ENGLISH
INFLUENCE ON AMERICAN IDEAS ABOUT MENTAL ILLNESS

Grace DeVries
HIST 400
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Introduction

Insanity and madhouses. Mental illness and hospitals. These two word pairings paint distinctly different pictures. Terms like insanity and madhouses bring to mind images of emaciated men and women, chained to cots or walls, shouting at things that are not there. These scenes are the embodiment of 'bedlam,' a term derived from the Bethlem Royal Hospital of London.¹ In contrast, mental illness and hospitals, which are more modern terms, have much tamer connotations. They imply a medical understanding, and that treatment, or even a cure, is possible. These terms, and what they represent, are the result of shifts in the thinking about mental illness throughout history. This paper will specifically address these shifts in the thinking and their causes in the British colonies and later, the newly formed United States. Using the Eastern State Hospital in Williamsburg, Virginia as a case study, this paper will answer the question: How strongly did English ideas influence ideas about mental illness and treatment in the colonies and early states?

The Eastern State Hospital of Williamsburg, Virginia, admitting its first patients in October of 1773, was the first hospital founded exclusively for the care and treatment of the mentally ill in the colonies. This distinction makes this institution the most appropriate for tracing shifts in ideas and attitudes about mental illness in the United States. Using trends in England to set the scene, this paper will highlight similar shifts in thinking about mental illness in North America, specifically Virginia and the Eastern State Hospital. After briefly exploring these shifts during the colonial period, this paper will focus on the Galt family as the mechanism by which these influences occurred. The legacy of the Galt family began when John Galt I was appointed visiting physician to the Eastern State Hospital in 1795. His son, Alexander Galt, took

¹ Roy Porter, *Madness: A Brief History* (Oxford: Oxford University Press, 2002), 70.

over in 1800, and then his son, John Galt II, became superintendent in 1841. This paper will conclude in 1862, when John Galt II dies during the Civil War.

In addition to evidence from the colonial period, this paper will also look at sources from each of these three members of the Galt family, such as patient notes, the treatments they used, and their personal documents. Collectively, this evidence will reveal that England strongly influenced the ideas, attitudes, knowledge, and treatments of mental illness in the British colonies. These influences were translated to the newly formed United States, especially Virginia and the Eastern State Hospital, until the mid-1800s. After the mid-1800s, at the same time as John Galt II's superintendency, primary sources indicate that England still had a moderate influence on his beliefs and the practices of the Eastern State Hospital. Unlike previous decades, however, so did France, and other hospitals in the United States. This evidence informs my overall argument: England had a strong influence on mental health practices in the colonies and United States, until the mid-1800s, which marked the addition of equally strong influences from France and other U.S. institutions.

Historiography

Historians of the American colonies and the early United States have been fascinated by the extent to which the developing nation was influenced by its mother country, as well as the ways in which it developed independently. Scholars who study this "continuity across the political divide between colony and nation" trace a fascinating path of growth that is unique to this colonial relationship.² While many historians have written about the history of mental illness in specific countries or regions, they rarely focus on this transfer of knowledge and

² Kariann Yokota, "Postcolonialism and Material Culture in the Early United States," *The William and Mary Quarterly*, 3rd ser., 64, no. 2 (April 2007): 265.

beliefs. This oversight is likely because the transfer of information across the Atlantic belongs to a relatively new field in history, called Atlantic History. Considered a novelty in the 1990s, this field is now considered an established facet of historical research.³ According to W. Bolster, an Atlanticist himself, these historians are characterized by "blurring historiographical and disciplinary boundaries, ignoring national boundaries, and probing novel social and cultural interactions,"⁴ all of which will prove true in this study.

There are two main camps in the literature, though no two authors have the exact same opinion or approach. One side claims that English influence on mental health in North America was actually quite limited, and that the states developed independently because of their unique situation and different needs. The other argument is more of an assumption. While the authors of this opinion do not directly discuss this English influence, they seem to take it for granted that Americans adopted all of their ideas, laws, institutions, treatments, and related aspects from England.

David Rothman is one of the most well known names in the field of the history of mental health, and argues that there was little to no English influence on the development of institutions for the mentally ill in the colonies. In *The Discovery of the Asylum; Social Order and Disorder in the New Republic*, Rothman addresses the question of what exactly inspired the various shifts in thinking of mental illness in the United States during the early republic. He sums up his argument by saying "it must be appreciated that while European precedents did exist for the Americans' discovery of the asylum, they would not have been binding unless they suited peculiar American conditions and needs," and the "American asylum was essentially

³ Alison Games, "Atlantic History: Definitions, Challenges, and Opportunities," *The American Historical Review* 111, no. 3 (2006): 745.

⁴ W. Jeffrey Bolster, "Putting the Ocean in Atlantic History: Maritime Communities and Marine Ecology in the Northwest Atlantic, 1500-1800," *The American Historical Review* 113, no. 1 (2008): 20.

homegrown, whatever the resemblance to European counterparts."⁵ Rothman claims that the move to institutionalization was not due to any English influence, but was an effort to maintain social order in a time when strict family and religious values were changing in the United States.

In *Changing Faces of Madness: Early American Attitudes and Treatment of the Insane*, Mary Ann Jimenez takes a narrower focus: Massachusetts from 1700 to 1840. Like Rothman, Jimenez argues that ideas of madness developed independently of English influence. Unlike Rothman, however, Jimenez claims that this difference was caused by the fact that colonists in Massachusetts viewed mental illness in terms of religion, while England had shifted more toward a medical approach. For example, while "English medical practice emphasized the importance of bleeding as... helpful in physical as well as mental disorders," in "the colonies, Cotton Mather suggested homelier folk remedies," such as spending time with friends and family and drinking syrup or whey.⁶ As the book progresses, Jimenez does acknowledge various ways that Massachusetts became more similar to England, but maintains that the English influence was only moderate, at most.

In contrast to both Rothman and Jimenez, a number of authors argue that English influences were so apparent in the United States that they are popularly agreed upon today and therefore require little more evidence or explanation. One author who pays little mind to the role and function of English influence on the United States is Roy Porter. His pocket-sized *Madness: A Brief History* is a broad study of the evolution of madness around the world. He mentions mental illness in the United States very briefly, and claims that in "Europe, and in North

⁵ David J. Rothman, *The Discovery of the Asylum; Social Order and Disorder in the New Republic* (Boston: Little, Brown, 1971), xlv

⁶ Mary Ann Jimenez, *Changing Faces of Madness: Early American Attitudes and Treatment of the Insane*. (Hanover, NH: University Press of New England, 1987), 46

America, the rise of the asylum is better seen" as an effect of urbanization.⁷ While my research will show that this claim about urbanization is not true for Virginia and the Eastern State Hospital, this scant reference to the United States still shows that Porter believes that the colonies did not develop independently from England.

Of the same opinion as Porter, Norman Dain writes specifically about the Eastern State Hospital in *Disordered Minds: The First Century of Eastern State Hospital in Williamsburg, Va., 1766-1866*. Like Porter, Dain believes that Virginia based its attitudes toward, and treatment of, mental illness on the English model and does not go into much detail about specific similarities, or about how this transfer of ideas occurred. He claims that "European influences rather than emulation of Philadelphia, then the leading colonial city, spurred Virginia to pioneer in the treatment of the mentally ill."⁸ However, his evidence to support this argument is slim. My research will include a number of primary documents addressing this English influence that Dain may have decided not to include, or missed entirely.

Gerald Grob, an expert in the subject of mental illness in America from the colonies to the modern United States, presents an argument that is relevant, and quite similar, to my chosen topic in his book *Mental Institutions in America; Social Policy to 1875*. Like Porter and Dain, Grob argues that the colonies were greatly influenced by England and other European examples. He also specifically discusses English influences in Virginia when he argues that, "Although Virginia was predominantly rural and agricultural in character and possessed no large urban center, British tradition in this most English of the English colonies seems to have provided much of the impulse [to build the Eastern State Hospital.]"⁹ He agrees with Rothman and

⁷ Porter, *Madness*, 95.

⁸ Norman Dain, *Disordered Minds: The First Century of Eastern State Hospital in Williamsburg, Va., 1766-1866*. (Williamsburg, VA: Colonial Williamsburg Foundation; Press of Virginia, Charlottesville, 1971), 2-3

⁹ Gerald N. Grob, *Mental Institutions in America; Social Policy to 1875*. (New York: Free Press, 1972), 25

Jimenez that there were differences between the conditions in the American colonies and in England. However, Grob argues, this only strengthens the argument he shares with Porter and Dain: the colonies were heavily influenced by England because, even though their needs were different, the colonies still adopted English ideas and methods. After considering each author's argument, I find that Grob's is the closest to my own. However, by narrowing my focus to the Eastern State Hospital and the Galt family, I am able to provide numerous examples of how this transfer of knowledge occurred and functioned in Virginia, details that Grob does not address in his own work.

Based on this brief review of the literature, one can see that there is no clear consensus on the extent to which England influenced the developments in mental health in the United States. The authors mentioned above do not directly address the ways in which this influence occurred, if they believe it did at all. This lack of focus on influence is especially obvious in works that discuss only one institution or region, such as histories of Eastern State Hospital or Bethlem Hospital. Additionally, the majority of their writings are at least two decades old. If 1970-1990 was the age of researching the history of mental illness in England and the United States, a fresh perspective on this Atlantic connection is certainly overdue. The 'Atlantic World' as a unique historical field is relatively new, and will provide an interesting scope within which to view the development of ideas about mental illness and treatments in early North America, as influenced by England.

My research on the history of the Eastern State Hospital in Williamsburg, Virginia will help fill these gaps in the current literature, and will provide a new way of considering this transfer of knowledge across the Atlantic. Because of this narrow focus, I am able to provide a detailed account of the ways in which the management of the Eastern State Hospital was

influenced by England, and other European countries. Using the aforementioned sources to strengthen my argument and provide background information, I present my research on the influences on the Eastern State Hospital. I argue that England strongly influenced the ideas, attitudes, knowledge, and treatments of mental illness in the British colonies, and the newly formed United States, until the mid-1800s when this strong influence became shared by England with France and other institutions in the United States.

English Ideas About Mental Illness Influence Colonial Beliefs Between 1607 and 1760

In the late 1400s, centuries before English colonists first crossed the Atlantic to North America, there were no institutions for the mentally ill in England. During this period, the family was the primary care provider. Records indicate that the mentally ill were often subject to poor treatment by their family, such as being "hidden away in a cellar or caged in a pigpen, sometimes under a servant's control."¹⁰ If totally rejected by their family and neighbors, the mentally ill had no choice but to leave the community and wander the countryside as vagrants. These wandering beggars inspired the laws that eventually required proof of residency to receive basic care in local communities, as required under the English Poor Law system.¹¹ As a last resort, if violent or dangerous mentally ill people were unable to be cared for by family or the community, they were generally confined in "whatever secure place was available, be it workhouse, lock-up, private madhouse, bridewell or gaol."¹²

In these cases of mental illness in England, religion was thought to be the cause.

Demonic influences, such as possessions, were the most commonly cited cases of mental illness.

¹⁰ Porter, *Madness*, 90.

¹¹ *Ibid.*

¹² Roy Porter, *Mind-forg'd Manacles: A History of Madness in England from the Restoration to the Regency*. (Cambridge, MA: Harvard University Press, 1987), 118.

As early as the 1500s, Catholic monasteries and priories began to provide care for dependent people, such as the poor, physically disabled, and mentally ill.¹³ The religion-based belief in the causes of mental illness lost popularity in the late 1600s, however, and was replaced by a focus on morality instead. This shift away from religion and toward moral causes is seen in an autobiography written by the Reverend George Trosse of England. Rather than citing religion as the sole cause, Trosse believed that his madness was both a possession "and a natural illness, brought about by sinful living."¹⁴ Attributing his mental illness to his failure to live a moral life, Trosse exemplifies this shift in thinking of mental illness as being caused by external forces, such as demonic possessions. Instead, he believed that the cause of his illness was internal, brought on by living sinfully. This turn away from religion in favor of morality occurred later in the colonies as well.

When English settlers first founded the colonies in the 1600s, mental illness was not a concern for public officials. Few chronically mentally ill English colonists crossed the Atlantic to settle in the New World, and recorded fits of madness in people who were already there were rare. The population was relatively low, and communities during this time were spread out, rural, and mainly agricultural.¹⁵ If cases did occur, the colonies had no universal method for handling them. However, by the end of the seventeenth century, most colonies adhered to the English Poor Law system, which put the responsibility on families or local communities to provide for all dependents: the sick, disabled, poor, and mentally ill.¹⁶

Similar to England, colonial communities also adopted stricter residency policies. For example, to receive any sort of charity or services in the colonies, individuals had to prove that

¹³ Dale Peterson, *A Mad People's History of Madness* (Pittsburgh, PA: University of Pittsburgh Press, 1982), 39.

¹⁴ *Ibid*, 26

¹⁵ Grob, *Mental Institutions in America*, 4.

¹⁶ *Ibid*, 10.

they were residents of the community, and had been for at least 3 months.¹⁷ These time limits varied within the colonies, usually between a few months to a year. Like the English Poor Law system, rules about proof of residency were commonly used in England during the same time that English colonists were leaving to settle in the colonies. Unsurprisingly, the colonists put these English laws in place because they were already familiar.¹⁸ In rare cases in the colonies where the insane person was a public nuisance or violent, they were imprisoned in the local jail. This represents adoption of another common English practice.¹⁹

As previously seen in England, mental illness in the colonies was considered a religious affliction. In the northern colonies, "the relationship of the distracted person to God or the devil was central to the understanding of madness for much of the colonial period," a belief previously common in England.²⁰ While the influence of religion on ideas about mental illness can be expected in the more religious northern colonies, it should be noted that religion played a role in caring for dependent people in Virginia as well. While Virginia did not have the same extreme focus on religious causes and treatments, care for dependent people "belonged to the vestries of the Established Church, which was the Church of England," in the same way that the church provided care for the mentally ill abandoned by their families and communities in England.²¹

Following the English model, a decline in the belief that religion caused mental illness occurred in the colonies around the middle of the eighteenth century. Instead, the blame of external forces, like God and the Devil, was replaced by the blame falling on the mentally ill person's failure to live within "certain moral limits."²² Both English and colonial authors cited

¹⁷ *Ibid*, 7.

¹⁸ *Ibid*, 5.

¹⁹ Jimenez, *Changing Faces of Madness*, 40.

²⁰ *Ibid*, 23.

²¹ Henry M. Hurd, *The Institutional Care of the Insane in the United States and Canada*. Vol. 3 (Baltimore: Hopkins, 1916), 703.

²² Jimenez, *Changing Faces of Madness*, 23.

these moral limits frequently. Though no writer actually defined them, the general belief was that mental illness was the result of "self-destruction, the wages of vice or sin."²³ Even without a strict definition, in both England and the colonies, this shift toward moral causes of mental illness, and dependency in general, led to a new, more hostile attitude toward those people who could not care for themselves. Now, dependent people were starting to be blamed for their own condition, and family and local care became less and less popular.²⁴ In England, and later the colonies, this led to the next shift in thinking about mental illness. This shift established a need for general institutions of care, as a means to care for dependent people who had no family or other people willing to take responsibility for them.²⁵

Movement Toward Institutionalization of the Mentally Ill in England Influences the Establishment of the Eastern State Hospital (1766 - 1795)

The movement toward institutionalization in England began with the Bethlem Royal Hospital in London. Bethlem Hospital, originally founded in 1247 as the religious house of St. Mary of Bethlehem, was the first institution in England to care for the mentally ill, beginning in the late fourteenth century.²⁶ This notorious English landmark was, and still is today, both an icon and a horror story of treatment for the mentally ill. For England as a whole, however, 1700 marks the turning point of the movement toward major institutionalization of the mentally ill. A few general institutions for dependent people did exist in England before 1700, but the establishment of general-care hospitals skyrocketed in the eighteenth century. For example, between "1719 and 1750... five new hospitals were founded in London alone, and nine others

²³ Porter, *Mind-forg'd Manacles*, 43.

²⁴ Rothman, *The Discovery of the Asylum*, 5.

²⁵ Jimenez, *Changing Faces of Madness*, 23.

²⁶ Porter, *Madness*, 90.

came into being elsewhere in the country."²⁷ While urbanization, an ever-growing population, and modern ideas about mental illness all contributed to this movement in England, it is important to note that a similar movement occurred in the British colonies decades later, under different circumstances.

This movement in the colonies began with the proposal for the Eastern State Hospital in 1766. Francis Fauquier, one of the Virginia colony's royal governors from 1758 to 1768, proposed an institution solely meant for the care of the insane.²⁸ This further shows that the colonies were strongly influenced by English trends because, as Grob notes, the colonies had no need for such an institution. In the 1700s, "there is little evidence that mental illness was widespread in colonial America."²⁹ Fauquier was English himself, and the movement toward institutionalization in England is likely what inspired him to propose that a similar institution be built in Virginia.³⁰ In his address to the House of Burgesses, Fauquier argued that "Every civilized Country has an Hospital for these People, where they are confined, maintained and attended by able Physicians, to endeavor to restore to them their lost Reason."³¹ With this statement, one can see that Fauquier's motivation was imitating other "civilized" countries, such as England. Throughout the address, there is no mention about the need for an institution for the mentally ill, likely because "there were, after all, only four insane persons in Virginia jails" during this time.³²

²⁷ Grob, *Mental Institutions in America*, 15.

²⁸ Mary A. Stephenson, *Eastern State Hospital Historical Report, Block 4 Lot 80-87. Report no. 1078* (Colonial Williamsburg Foundation Library Research Report Series. Williamsburg, VA: Colonial Williamsburg Foundation Library, 1990), 2.

²⁹ Grob, *Mental Institutions in America*, 11.

³⁰ Shomer S. Zwelling, *Quest for a Cure: The Public Hospital in Williamsburg, 1773-1885* (Williamsburg, VA: Colonial Williamsburg Foundation, 1985), 5.

³¹ Stephenson, *Eastern State Hospital Historical Report*, 2.

³² Grob, *Mental Institutions in America*, 25.

The legislation to establish the hospital was enacted in 1770, and the Eastern State Hospital was opened to accept its first patients in 1773.³³ The initial management of the Eastern State Hospital also mimicked English practices. For example, the Eastern State Hospital publicized its opening in the *Virginia Gazette* on September 16, 1773:

The Public Hospital, established by an act of the General Assembly for the reception of ideots, lunaticks, and other persons of unsound minds, being now compleated, notice is hereby given that the court of directors will meet at the said hospital on Tuesday the 12th of October next, to receive all such persons as may be sent thereto.³⁴

At the scheduled Court of Directors meeting, two cases were presented and admitted as the first patients of the Eastern State Hospital.³⁵ This system of management was largely inspired by English methods in institutions "where, in many cases, a board of trustees, or directors, managers, or governors was selected by the annual subscribers to the funds of the institution."³⁶ When the time came for an institution to go through the process of admitting patients, "applicants would be examined by a court of the governors to ensure their suitability."³⁷ The Court of Directors of the Eastern State Hospital functioned essentially the same way, and with a similar name. Furthermore, these governing bodies had the final say in admissions and discharges in both England and the Eastern State Hospital.

The make-up of the staffs in Bethlem Hospital and the Eastern State Hospital were also similar, though not identical. The differences between the two institutions are likely due to different patient populations. Records from the seventeenth century indicate that the medical staff of Bethlem Hospital "consisted of a non-resident physician, an apothecary, and a visiting

³³ Zwelling, *Quest for a Cure*, 9.

³⁴ Stephenson, *Eastern State Hospital Historical Report*, 8.

³⁵ Hurd, *The Institutional Care of the Insane in the United States and Canada*, Vol. 3, 709.

³⁶ Henry M. Hurd, *The Institutional Care of the Insane in the United States and Canada*. Vol. 1. (Baltimore: Hopkins, 1916), 183.

³⁷ Porter, *Mind-forg'd Manacles*, 126.

surgeon," in addition to the general maintenance staff.³⁸ In the Eastern State Hospital, however, the only medical professional was a non-resident physician. Both physicians had the "responsibility for providing whatever medical treatment was deemed appropriate."³⁹ The absence of any other medical practitioners in the Eastern State Hospital can be explained by the difference in the number of patients each hospital served. During this period, in the Eastern State Hospital, "the number of patients ranged from six to fifteen," while patient records from Bethlem Hospital in the eighteenth century lead to estimations of a few hundred.^{40,41} Aside from the difference in numbers of personnel and patients, one can see that the establishment and initial management of the Eastern State Hospital was clearly modeled after that found in Bethlem Hospital. This difference in patient numbers further shows that Virginia had no great need for an institution for the mentally ill during this time, and therefore the establishment of the Eastern State Hospital was due to strong English influence.

Institutions in England Influence Practices in the Eastern State Hospital Under John Galt I (1795 - 1808)

John Galt I was born in 1744, and attended William and Mary College in Williamsburg, Virginia.⁴² He received his medical education in the 1760s in London and "perhaps also in Edinburgh and Paris," as indicated by his travels recorded in his personal account book where he kept track of his purchases abroad.^{43, 44} It is unclear whether John Galt I had returned to the

³⁸ "The Old "Bethlem" and the New: Seven Hundredth Anniversary of Foundation." *The British Medical Journal* 1, no. 4512 (June 28, 1947): 935.

³⁹ Grob, *Mental Institutions in America*, 27.

⁴⁰ Zwelling, *Quest for a Cure*, 9.

⁴¹ Porter, *Mind-forg'd Manacles*, 33.

⁴² "Galt Family of Williamsburg." *The William and Mary Quarterly* 8, no. 4 (April 1900): 259.

⁴³ Dain, *Disordered Minds*, 33-34.

⁴⁴ "Memorandum of accounts of [Dr. John Minson Galt], 1767," Galt Papers (I), 1745-1892, Series 2: Personal Papers, 1755-1904, Box 1, Folder 1, Special Collections, Swem Library, College of William and Mary.

United States by the beginning of the Revolutionary War. There are holes in the history of the Eastern State Hospital as well, as few records from the hospital survived the Revolutionary War. However, one letter from the Court of Directors to the governor at the time shares a report on the hospital's condition in 1781 that describes the institution as "destitute" and "without provisions." The letter also contained a list of the counties of origin of the current patients, "in Hopes that your Excellency will order ye means of returning them to their respective Counties provided no method can be adopted for their support."⁴⁵

While historians may never know what exactly happened in the hospital during this period, a few years later, in 1785, John Galt I was appointed visiting physician to the Eastern State Hospital.⁴⁶ While the hospital did employ another visiting physician before the Revolutionary War, there are no noteworthy records that have survived from his time of employment.⁴⁷ A few years after the end of the Revolution, a letter written in October of 1786 from the Court of Directors announces that they "have at length effected the repairs of the Hospital."⁴⁸ With everything back to normal, John Galt I continued his work at the Eastern State Hospital for over a decade.

To highlight the similarities in practices and treatment methods later found in the Eastern State Hospital, a brief history of Bethlem Hospital, and English institutions in general, is necessary. Since their founding in the early 1700s, these English hospitals adhered to the theory of Humoralism when ascribing causes and treatments for illness, both physical and mental. First created by the Greeks, this theory proposed that humans consisted of four balanced 'humors' and any illness could be attributed to an excess or lack one of the four bodily fluids: "blood, phlegm,

⁴⁵ Stephenson, *Eastern State Hospital Historical Report*, 10.

⁴⁶ "Galt Family of Williamsburg," 259.

⁴⁷ Zwelling, *Quest for a Cure*, 21.

⁴⁸ Stephenson, *Eastern State Hospital Historical Report*, 12.

yellow bile (or choler), and black bile."⁴⁹ Because a humoral imbalance was the cause of both physical and mental illness, the treatments were also the same. This belief meant that doctors were considered qualified to treat both physical and mental illnesses interchangeably. Popular treatments in English hospitals during the eighteenth century included hot or cold baths, bleeding, "purging, blistering, and the administration of emetics."⁵⁰ These treatments, and general belief in Humoralism, would also become popular decades later in colonial hospitals, including the Eastern State Hospital.

This belief in Humoralism evolved in the late 1700s to a more medicine-based approach. "Traditional humoralism... yielded to new medical theories," such as anatomy and other science-based fields.⁵¹ This movement toward new medicinal approaches complemented treatment methods already in use, rather than replacing them. While purging, bleeding, and baths were still frequent, drugs like opium and camphor became part of "a new vocabulary... invoked to replace the old language of humours."^{52, 53} By 1800, there were approximately 50 institutions in England for the treatment of the mentally ill. While this medical approach changed the way doctors thought about mental illness, actual practices in these institutions changed very little.⁵⁴

Conditions in these institutions during the 1700s were harsh and often cruel. For example, William Cullen, a well-known medical practitioner in England and teacher of John Galt I, "believed mental patients improved when they stood in awe and fear of their doctors."⁵⁵ Through intimidation, doctors hoped that their patients could be persuaded to "pursue a life of

⁴⁹ Porter, *Mind-forg'd Manacles*, 39.

⁵⁰ Jimenez, *Changing Faces of Madness*, 46.

⁵¹ Porter, *Mind-forg'd Manacles*, 47.

⁵² Dain, *Disordered Minds*, 34.

⁵³ Porter, *Mind-forg'd Manacles*, 47.

⁵⁴ Porter, *Madness*, 97.

⁵⁵ Zwelling, *Quest for a Cure*, 16.

reason" so that they could be discharged from these institutions.⁵⁶ One example of this cruel treatment was the restraining and confinement of patients, often for long periods of time. A report on the conditions of Bethlem Hospital noted that "patients were often chained to the walls as well as manacled and that one of the female patients had been chained without release for eight years."⁵⁷ Another male patient had been restrained by a collar around his neck, chaining him to his own bed, for almost twelve years.⁵⁸ In addition to this mistreatment, Bethlem Hospital also allowed spectators to tour the institution as if it were a human zoo. For a fee, people could walk through the hospital and gawk at the patients, under the defense that Bethlem Hospital was providing "object lessons to the public at large."⁵⁹

In a similar fashion, the Eastern State Hospital in Virginia adhered to these beliefs about mental illness and treatment methods years later under John Galt I. This can be attributed to his education in England, especially his learning under William Cullen. While England adhered to the theory of Humoralism in the 1600 and early 1700s, Virginia adopted this theory in the late 1700s. Like English practitioners, for John Galt I "[n]o separation, in theory, divided mental illness from other forms of 'physical' disorders."⁶⁰ Because of this belief, treatments such as bleeding, purging, and blistering were also common in the Eastern State Hospital, as they were in England institutions. It is unclear when John Galt I shifted his thinking to more medicine-based practices, but, around the turn of the century, the "primary therapeutic techniques available to doctors... were powerful drugs, various water treatments, bleeding instruments, blistering salves,

⁵⁶ *Ibid.*

⁵⁷ Peterson, *A Mad People's History of Madness*, 74.

⁵⁸ *Ibid.*

⁵⁹ Porter, *Madness*, 70.

⁶⁰ Dain, *Disordered Minds*, 32.

and an array of restraining devices." This transformation suggests that he likely used a combination of these treatment methods for his patients at the Eastern State Hospital.⁶¹

In addition to borrowing ideas about mental illness from England, Galt also adopted similar treatment styles. Adhering to William Cullen's philosophy of intimidating patients into being cured, Galt often employed an "aggressive course of action" to inspire patients to "choose rationality over insanity."⁶² The Eastern State Hospital also made use of English-style medicine and restraints. For example, even the medicines themselves that Galt used were "most of them imported from Europe."⁶³ Records from a blacksmith in Williamsburg also indicate that "leg irons and chains" were also used in the Eastern State Hospital in the late 1700s, similar to the restraints used in Bethlem Hospital in London.⁶⁴ These practices used by John Galt I were clearly influenced by those used earlier in English institutions, and were likely shared with his son during the few years that they worked together as physicians to the Eastern State Hospital. John Galt I died in 1808, leaving the care of the patients of the Eastern State Hospital to his son, Alexander Galt.⁶⁵

Movement Toward the Moral Treatment in England Influences the Management of the Eastern State Hospital Under Alexander Galt (1800 - 1841)

Dr. Alexander Galt was born in 1771 and educated at the College of William and Mary in Williamsburg, VA. After graduating, he traveled across the Atlantic to continue his education at Oxford University, where he studied medicine and visited various English hospitals.⁶⁶ Although

⁶¹ Zwelling, *Quest for a Cure*, 13-14.

⁶² *Ibid*, 13.

⁶³ Dain, *Disordered Minds*, 34.

⁶⁴ *Ibid*, 35.

⁶⁵ Zwelling, *Quest for a Cure*, 21.

⁶⁶ "Galt Family of Williamsburg," 259.

Alexander Galt did not become an official visiting physician at the Eastern State Hospital until 1800, records indicate that he began visiting patients in the early 1790s through his private practice. Alexander Galt kept detailed notes about his patient visits, and visits to other hospitals. These sources reveal the types of illnesses he most often treated, how he treated them, and his thoughts on the practices of other hospitals. In these sources are a number of examples that show that English ideas and practices had a large influence on the way Galt viewed and treated his own patients at the Eastern State Hospital.

One example of Alexander Galt being influenced by English practices can be found in a journal entry on August 11, 1793 detailing his impression of the Bethlem Royal Hospital in London. While there is no name on the document, one can reasonably conclude that Alexander Galt was the author because he was in England during the time the entry was written, according to multiple letters that he received in and around London during this time.⁶⁷ He also kept a journal during 1792 and 1793 where he discussed other visits to English hospitals, likely the source of this entry where he talks about Bethlem Hospital.⁶⁸ In the entry, the author described the poor conditions of the hospital as similar to the conditions that were seen throughout England at this time. Specifically, he discussed the way patients ate porridge or rice milk for most meals, and how they were "purged once a week, frequently bled, and sometimes blistered on the head."⁶⁹ The patients were generally kept restrained and had limited activities, such as a few card games or spending time in the gardens of the hospital. Alexander Galt also mentioned their plans to see "Margaret Nicholson who attempted to stab the King."⁷⁰ Nicholson was a famous

⁶⁷ "Lucretia Craig to Dr. Alexander Galt, London, June 5, 1793," Galt Papers (I), 1745-1892, Series 2: Personal Papers, 1755-1904, Box 1, Folder 4, Special Collections, Swem Library, College of William and Mary.

⁶⁸ "A.D. Galt Notes on Patients at Guys and St. Thomas' Hospitals, 1792-1793," Galt Papers (I), 1745-1892, Series 1: Medical Papers, 1756-869, Box 1, Folder 7, Special Collections, Swem Library, College of William and Mary.

⁶⁹ "Journal Entry," Records of Eastern State Hospital, 1770-2009. 31793, Box 31, Folder 29, State government records collection, The Library of Virginia, Richmond, Virginia.

⁷⁰ *Ibid.*

Englishwoman who assaulted King George III in 1786. This is further evidence that the patients in Bethlem indeed served as a spectacle for visitors.⁷¹

In addition to these descriptions, the journal also contains accounts of his visits to other English hospitals, specifically Guy's Hospital and St. Thomas' Hospital in London. Alexander Galt viewed a number of surgeries at both hospitals, such as a removal of a testicle at St. Thomas' and an "amputation of the leg" at Guy's, between the dates September 25, 1792 and February 20, 1793.⁷² Clearly Alexander Galt learned from these visits and took this medical knowledge back to the Eastern State Hospital with him. In addition to these more hands-on educational opportunities, ticket stubs indicate that he also went to multiple lectures on surgery and other medical treatments during his time in England. For example, one ticket admitted Galt to the "Autumn course of Mr. Cline's lectures on Anatomy and Surgery" in 1792, while another granted him entrance to "Mr. Astley Cooper's lectures on Surgery" in 1793.^{73,74}

After his education in England, records indicate that Alexander Galt returned to Virginia and began visiting patients in a private practice. The types of cases that he most frequently handled, and the treatments he used on these patients, all reflect his medical training and experiences in England. For example, the first entry of his patient notebook is dated in 1793 and, like he studied in England, the majority of the cases he describes are physical illnesses rather than mental. For example, he saw Eliza Collins for diarrhea, Mary Barret for a "low nervous

⁷¹ Porter, *Madness*, 70.

⁷² "A.D. Galt Notes on Patients at Guys and St. Thomas' Hospitals, 1792-1793," Special Collections, Swem Library, College of William and Mary.

⁷³ "Ticket admitting Mr. Alexr. D. Galt to the Autumn Course of Mr. Cline's lectures on Anatomy and Surgery, Autumn 1792," Galt Papers (I), 1745-1892, Series 2: Personal Papers, 1755-1904, Box 1, Folder 3, Special Collections, Swem Library, College of William and Mary.

⁷⁴ "Ticket admitting Alexr. D. Galt to Mr. Astley Cooper's lectures on Surgery, January 28, 1793," Galt Papers (I), 1745-1892, Series 2: Personal Papers, 1755-1904, Box 1, Folder 4, Special Collections, Swem Library, College of William and Mary.

fever," and Lewis Carr for "diarrhea from the abuse of spirituous liqueurs."⁷⁵ While Eliza Collins is not mentioned again, Mary Barret was recorded as cured a few weeks later, and Lewis Carr "died early in the evening"⁷⁶ three days after Galt's initial visit.

Alexander Galt also kept notebooks of patient visits when he became an official visiting physician at the Eastern State Hospital alongside his father, Dr. John Minson Galt, in 1800.

Another example of Alexander Galt's adoption of English treatments is the case of Peggy Cooper, who he saw on April 17, 1800. He recommended a cold bath, another treatment that he included in his journal entry about the Bethlem Hospital. While it is unclear exactly what Peggy Cooper was diagnosed with, he continued to prescribe cold baths for her treatment on at least four different occasions, and then made no further mention of her after 1802.⁷⁷ Similarly, in 1818 he treated a young girl with a cough and "pain of head" by applying a blister.⁷⁸ He also noted a servant with diarrhea who he similarly treated with a blister, and other cases of stomach pains, cholera, dysentery, remittent fever, and rheumatism during this time.⁷⁹

At the beginning of the nineteenth century, the Eastern State Hospital functioned in the same manner under Alexander Galt as it had under John Galt I.⁸⁰ One secondary source describes the patients during this time as living a "pallid and confined existence."⁸¹ However, this stagnation would soon change. During the early years of Alexander Galt's career, a new movement called 'moral treatment' was beginning in Europe. Replacing "religion as divine

⁷⁵ Galt, Alexander. Notes on Patients, 1793-1795, Manuscript. Mss. 78 G13, MsV 17. Special Collections Research Center, Swem Library

⁷⁶ *Ibid.*

⁷⁷ Galt, Alexander. Lunatic Hospital Book (A.D. Galt's Hospital Notes), 1799-1809. Manuscript. Mss. 78 G13, MsV 15. Special Collections Research Center, Swem Library

⁷⁸ "Case histories," Records of Eastern State Hospital, 1770-2009. 31793, Box 29, Folder 31, State government records collection, The Library of Virginia, Richmond, Virginia.

⁷⁹ "Case histories," Records of Eastern State Hospital, 1770-2009. 31793, Box 29, Folder 32, State government records collection, The Library of Virginia, Richmond, Virginia.

⁸⁰ Zwelling, *Quest for a Cure*, 17.

⁸¹ Dain, *Disordered Minds*, 61.

madness," moral treatment adhered to scientific Enlightenment thinking. This movement marked the end of the relationship between religion and mental illness in Europe, and later the United States as well.⁸²

One of the most famous practitioners of this moral treatment was Dr. Philippe Pinel, who initiated reform at the Salpêtrière and Bicêtre Hospitals in Paris in the 1790s. "Inspired by the Revolutionary ideals of liberty, equality, and fraternity... Pinel figuratively (and perhaps literally) struck off the chains from his charges."⁸³ Encouraged by the French Revolution, Pinel adopted progressive Enlightenment thinking and pushed for the abolishment of physical restraints, criticizing them as lazy treatments that exacerbated patients' symptoms. Pinel argued that, rather than treating mental illness with physical means, patients needed a mental approach to treatment. Moral treatment lauded the healing effects of "[q]uiet, silence, regular routine," rather than the chaos that had come to be characteristic of these institutions.⁸⁴

Similarly, the rise of moral treatment in England first occurred in 1796, with the help of Pinel's English counterpart, William Tuke. Tuke, an English Quaker, opened the Retreat in York, England. This institution discouraged the use of restraints and emphasized caring for patients in a family-style manner: "Patients and staff lived, worked, and dined together in an environment where recovery was encouraged through praise and blame, rewards and punishment, the goal being the restoration of self-control."⁸⁵ Another asylum in Lincolnshire lauded "neatness of person and exercise being the principal features of [the doctor's] admirable system, health and

⁸² Porter, *Mind-forg'd Manacles*, 81.

⁸³ Porter, *Madness*, 104-105.

⁸⁴ Rothman, *The Discovery of the Asylum*, 138.

⁸⁵ Porter, *Madness*, 104.

cheerfulness conjoined toward the recovery of every person." ⁸⁶ This quote shows the importance of exercise and regular routine for patients in the moral treatment system.

In addition to the formation and reformation of these mental health asylums, old English hospitals, like Bethlem, also experienced reforms. Bethlem was subject to multiple investigations by government committees to ensure that the hospital adhered to these new moral principles. While these reports indicate that Bethlem still occasionally used restraints for some patients and treated them by "bleeding, vomiting, then purging," the practice of allowing the public to tour the hospital and treat patients as a "side-show" ended at the end of the eighteenth century.⁸⁷ This difference in Bethlem Hospital can be attributed to limited resources, such as "overcrowding" and too few attendants.^{88,89} Indeed, Bethlem seems to be an anomaly in its reluctance to fully adopt the moral treatment method that was standard among other English hospitals, such as the York Retreat and Lincolnshire asylum.⁹⁰

Decades later in Virginia, the Eastern State Hospital underwent a similar investigation in 1835. While the resulting report praised the cleanliness of the building and diet of the patients, it was overall "critical of the institution's management."⁹¹ In response to this criticism, the Court of Directors were strong supporters of Galt's actions as he "broadened the practice of moral treatment" in 1839.⁹² For example, the Eastern State Hospital opened its gardens to patients and encouraged them to take frequent walks on the grounds.⁹³ Furthermore, this movement toward moral treatment was not just limited to the Eastern State Hospital. Throughout the United States,

⁸⁶ *Ibid*, 103.

⁸⁷ Porter, *Mind-forg'd Manacles*, 91.

⁸⁸ Rothman, *The Discovery of the Asylum*, 149-150.

⁸⁹ Porter, *Mind-forg'd Manacles*, 125.

⁹⁰ Peterson, *A Mad People's History of Madness*, 74.

⁹¹ Zwelling, *Quest for a Cure*, 25.

⁹² Dain, *Disordered Minds*, 65.

⁹³ Zwelling, *Quest for a Cure*, 26.

of "all the activities, asylums prized labor the most, going to exceptional lengths to keep patients busy with manual tasks."⁹⁴

Further evidence suggests that, over the course of his career, Alexander Galt began to blend his medicine-based treatment style that he had learned during his time in England with this new moral treatment. In addition to Alexander Galt's personal writings, his son, John Galt II, also wrote a book on the treatment of insanity in which he included a section on his father's philosophy and treatment of the mentally ill. Naturally, the timeline of Alexander Galt's work that was observed and recorded by his son occurred after the work he detailed himself in his patient notebooks. This provides an interesting contrast between Alexander Galt's beliefs about mental illness and treatment styles in the early 1800s, and his beliefs and treatment styles in the 1830s. John Galt II reported that his father used the "antiphlogistic system, along with baths," in addition to tonics for melancholia, and bleeding.⁹⁵ However, later in the section, John Galt II also recalls his father "speaking of the great modern improvement in the moral treatment of patients."⁹⁶ While the Eastern State Hospital did not fully adopt moral treatment under Alexander Galt, his son did implement this practice when he became superintendent, which was likely due, in part, to encouragement from his father.

Moral Treatment in England and France and Practices in U.S. Institutions Influence the Management of the Eastern State Hospital Under John Galt II (1841 - 1862)

⁹⁴ Rothman, *The Discovery of the Asylum*, 145.

⁹⁵ John M Galt, *The Treatment of Insanity* (New York: Harper & Brothers, 1846), 484.

⁹⁶ *Ibid.*

John Galt II was born in Williamsburg, VA, on March 19, 1819.⁹⁷ Like his father, he attended the College of William and Mary and graduated in 1838. After graduating, he "read medicine under his father for a time, and then entered the University of Pennsylvania, receiving from this school his degree of M. D. in 1841."⁹⁸ Later that year, upon his father's death, he became superintendent of the Eastern State Hospital at the age of 22.⁹⁹ This was the first time the title 'Superintendent' was used at the hospital. The new terminology reflected the need for a full-time medical professional, rather than a 'visiting physician' who worked at the hospital but also maintained a private practice.¹⁰⁰ Like John Galt I and Alexander Galt, John Galt II was strongly influenced by English beliefs and practices. However, in contrast to his father and grandfather, John Galt II was also influenced by France and by other institutions in the United States.

As mentioned in the previous section, England and France adopted moral treatment in the 1790s, and Alexander Galt began implementing some aspects of this system while he was visiting physician at the Eastern State Hospital. When John Galt II became superintendent, however, he fully adopted moral treatment. During the first few years of his superintendency, Galt II "ordered from England... standard contemporary works on insanity," which is further evidence of the strength of English influence.¹⁰¹ Additionally, French influence was also highlighted in his book, *The Treatment of Insanity*, published in 1846. Galt II had an entire section devoted to "Treatment in the Hospitals in the South of France," and included another section that contained translations of Philippe Pinel's work.¹⁰² Pinel's most famous writing about moral treatment, *Traité Medico-Philosophique Sur L'Alienation Mentale*, or *A Treatise on*

⁹⁷ Henry M. Hurd, *The Institutional Care of the Insane in the United States and Canada*. Vol. 4. (Baltimore: Hopkins, 1916), 408.

⁹⁸ *Ibid*, 409.

⁹⁹ Hurd, *The Institutional Care of the Insane in the United States and Canada*, Vol. 1, 14.

¹⁰⁰ Zwelling, *Quest for a Cure*, 30.

¹⁰¹ Dain, *Disordered Minds*, 72.

¹⁰² John M Galt, *The Treatment of Insanity* (New York: Harper & Brothers, 1846), 'Contents.'

Insanity, was published in 1809.¹⁰³ It is likely that Galt II himself translated the sections of Pinel's writing that were included in his book, as he was known to speak multiple languages, including French.¹⁰⁴ The inclusion of these sections shows that John Galt II was interested in practices in France as well as England, and that he felt that Pinel's work should be read by his contemporaries in the United States.

In another writing by John Galt II, he shares his belief that "You do not give self-control to the lunatic by punishing him."¹⁰⁵ Practices in the Eastern State Hospital between 1841 and 1862 reflected this adherence to the system of moral treatment. John Galt II endeavored to make "life in the asylum... as sane, orderly, and pleasant as possible... to emphasize the patients' sanity rather than their insanity as a means of curing them."¹⁰⁶ To achieve this goal, Galt II improved upon his father's efforts at increasing entertainment for patients. According to an 1845 report by John Galt II, patient numbers had increased since his grandfather's management to "seventy males and fifty eight female patients."¹⁰⁷ These men and women had spent varying lengths of time in the Eastern State Hospital, from two months to twenty-two years, and came from different professions, such as farmers, shoemakers, and a carpenter, among others. This variety was represented in the changes implemented by John Galt II. During this time, not only were patients allowed to walk around the gardens, but the Eastern State Hospital also "organized a carpentry shop, sewing, spinning, and weaving rooms, a shoemaking shop, a patient library, a game room, and expanded the range of activities in the hospital garden and wood yard."¹⁰⁸

¹⁰³ *Ibid*, 41.

¹⁰⁴ Hurd, *The Institutional Care of the Insane in the United States and Canada*, Vols. I, 13.

¹⁰⁵ "Ideas on Insanity and Medicine," Galt Papers (II), 1840-1862, Series 1, Box 1, Folder 57: John Minson Galt II, Medical Papers, 1842-1861, Special Collections, Swem Library, College of William and Mary.

¹⁰⁶ Zwelling, *Quest for a Cure*, 34.

¹⁰⁷ "[John M. Galt] to Dr. Cooper," Galt Papers (I), 1745-1892, Series 2: Personal Papers, 1755-1904, Box 7, Folder 66, Special Collections, Swem Library, College of William and Mary.

¹⁰⁸ Zwelling, *Quest for a Cure*, 32.

Based on this evidence, it is clear that John Galt II and practices at the Eastern State Hospital were strongly influenced by the shift toward moral treatment in England and France. In addition to these influences, evidence also suggests that Galt II was equally influenced by other institutions in the United States. For example, along with Pinel's writings, John Galt II's book also included sections on U.S. institutions, "American Asylums."¹⁰⁹ In another section, "Practice in Virginia," Galt II described the Eastern State Hospital, and claimed that moral treatment was not unique to this institution. Practices included "the various means employed in American asylums generally, so modified as to be suitable to the character of the patients here. As in other institutions, the purpose in view has been mental and bodily occupation of some kind."¹¹⁰ Galt II further argued, "of course, amusements and labour form the staple of these measures."¹¹¹ These quotes show that he believed national communication about practices for treating the mentally ill was important, and that other institutions also adhered to the moral treatment system.

Another example of his looking to other U.S. institutions for influence is his description of the Pennsylvania Hospital, which he visited during his time in Philadelphia. This institution was founded in 1751 as a general hospital, but also received mental patients when they had nowhere else to go.¹¹² In a letter to his sister, John Galt II talks about the institution favorably, praising its "cheerful and home-like appearance."¹¹³ He also notes vases of flowers, which were "the work of the patients."¹¹⁴ It is clear that the Pennsylvania Hospital also adhered to the moral treatment method for their mentally ill patients, as indicated by their attempts to run the institution like a home and provide activities such as gardening.

¹⁰⁹ John M Galt, *The Treatment of Insanity*, 'Contents.'

¹¹⁰ *Ibid*, 488.

¹¹¹ *Ibid*.

¹¹² Thomas G. Morton, *The History of the Pennsylvania Hospital, 1751-1895* (New York: Arno Press, 1973), 3.

¹¹³ "Trenton, New Jersey. John M. Galt to Elizabeth J. Galt, Williamsburg," Galt Papers (I), 1745-1892, Series 2: Personal Papers, 1755-1904, Box 8, Folder 84, Special Collections, Swem Library, College of William and Mary.

¹¹⁴ *Ibid*.

John Galt II also traveled to other U.S. institutions, recording impressions in a personal notebook. These other depictions were not nearly as flattering. For example, in an entry about Frankford Asylum in Pennsylvania on March 16, 1843, Galt II wrote, "I saw none of them [the patients] occupied in any amusements except reading."¹¹⁵ In Bloomingdale Asylum in New York, there was a "girl, trying to get out constantly... she had gnawed at the door with her teeth."¹¹⁶ In another entry, John Galt II notes a particularly horrifying story from McLean Hospital in Massachusetts: a case where the patient had a "propensity to bite off his tongue, biting off a piece every day... he had a hole bored in one of the upper and lower teeth and inserted a wire and thus restrained him and he was cured."¹¹⁷ John Galt II's negative descriptions give evidence to his belief that "idleness and isolation... only encouraged withdrawal," not healing.¹¹⁸ While the Eastern State Hospital and Pennsylvania Hospital had clearly adopted the system of moral treatment by this time, descriptions such as these show that not every institution in the United States had reached the same point in development.

These notes of the visits to other U.S. institutions and the sections in his book serve as evidence that John Galt II had begun to look within the country for influence. There is also evidence that other American institutions mimicked this practice. For example, John Galt II was member of the Association of Medical Superintendents of American Institutions for the Insane.¹¹⁹ Founded in 1844, the purpose of this medical association was to meet "for conference respecting problems which arose in the care of the insane, or in the conduct of institutions."¹²⁰ The mere existence of this association shows that medical practitioners in the United States had

¹¹⁵ "Notebook of John M[inson] Galt [II] containing entries on various mental hospitals, 1843-1855," Galt Papers (III), 1750-1991, Series 2: Group II, 1808-1880 and undated, Box 2, Folder 12, Special Collections, Swem Library, College of William and Mary.

¹¹⁶ *Ibid.*

¹¹⁷ *Ibid.*

¹¹⁸ Zwelling, *Quest for a Cure*, 33.

¹¹⁹ Hurd, *The Institutional Care of the Insane in the United States and Canada*, Vol. 1, 3.

¹²⁰ *Ibid.*, 14-15.

also begun to look internally for guidance on the best institutional practices and most effective treatment methods.

Another example that institutions during this time tried to adopt moral treatment is that the Association requested that John Galt II write and share a report "On Reading, Recreation, and Amusements for the Insane."¹²¹ This request shows that the Eastern State Hospital was indeed a leading figure in the practice of moral treatment at this time, and also shows that other institutions desired to adopt this method of treatment as well. As more institutions implemented moral treatment, their "favorite metaphor was a family one, and they borrowed freely from family vocabulary to describe asylum procedures."¹²² Additionally, many medical practitioners who believed in the "therapeutic effects of a rigid schedule also introduced a punctuality into the asylum routine."¹²³ This shift in popular practices shows that other U.S. institutions were following the same pattern as the Eastern State Hospital during the mid-1800s. Unfortunately, John Galt II died shortly after these accomplishments in 1862.¹²⁴ However, he left a legacy behind. The Eastern State Hospital remains open and adheres to the benevolent beliefs and practices of moral treatment still today.

Conclusion

In conclusion, the evolution of beliefs about mental illness and treatments throughout history is complex. Based on the presented information, one can now better understand these two word pairings: insanity and madhouses, and mental illness and hospitals. The terms 'insanity' and 'madhouses' bring to mind images of isolated people, malnourished and restrained, much like

¹²¹ *Ibid*, 17.

¹²² Rothman, *The Discovery of the Asylum*, 151.

¹²³ *Ibid*, 153.

¹²⁴ Zwelling, *Quest for a Cure*, 47.

early descriptions of the Bethlem Royal Hospital in London. In 1773, when the Eastern State Hospital was established, this institution for the care of the mentally ill followed the same practices, evoking the same mental images. At the end of the eighteenth century, however, reformers like Philippe Pinel of France and William Tuke of England initiated a movement toward reform in their respective countries. This adoption of moral treatment made everyday life in English institutions the picture of the orderly, patient-focused environment painted by the terms 'mental illness' and 'hospitals.' Decades later, when the Eastern State Hospital followed suit, they had similar results. This pattern is significant in the discussion of the development of the British colonies into the United States, and how they were influenced in their practices and beliefs about mental illness.

During the colonial period, settlers clearly inherited beliefs about mental illness, such as whether insanity was a religious matter or an issue of morality, from England. Later, the founding of the Eastern State Hospital was the result of English influence in the form of a proposal by Englishman Francis Fauquier. The general management of the institution, such as the formation of a Court of Directors, was also modeled after English examples. Through John Galt I, we can see specific examples of the transfer of knowledge about mental illness from England across the Atlantic, through his English education and use of English treatment styles. Alexander Galt also received his medical education in England, and visited a number of English institutions during his time abroad, most notably Bethlem Hospital of London. When he returned to Virginia, his detailed patient notes and other records show that he closely followed the practices he learned in England. Furthermore, when the movement toward moral treatment began in the 1790s, it is clear that he also made efforts to implement similar reforms. While this English influence on the Eastern State Hospital is clear, it is also worth noting that other

institutions in the United States were influenced by England as well. This was evidenced by the similarity in treatment styles found in other hospitals, and the Virginia government supporting Alexander Galt's changes toward moral treatment.

Finally, in the mid-1800s, John Galt II shows that medical practitioners in the United States were no longer influenced solely by England. Through his own published works, he demonstrated an interest in French practices and ideas about mental illness, specifically those of Pinel. The formation of the Association of Medical Superintendents of American Institutions for the Insane in 1844 also provides a clear example of how U.S. institutions had evolved from using English institutions as their only model. All of these examples show that England had a strong influence on the evolution of mental illness in the colonies and early United States. While English influence continued, during the mid-1800s, France and other U. S. institutions became equally influential. With this knowledge, it would be worthwhile to continue to trace the development of the Eastern State Hospital, as the institution did remain open after John Galt II's death. Further investigation into other U.S. institutions would also provide a clearer picture of the full extent of English influence, and later, the combined influence of England, France, and other U.S. institutions.

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